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S. WARREN JUN 3 0 2017

COVER LETTER

Division of Corporations			
Continental Private Jets LLC SUBJECT:			
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.		
Please return all correspondence concerning thi	s matter to the following:		
Ligia P. Evangelista			
Name of Person			
Continental Private Jets LLC			
Firm/Company			
600 Carrotwood Terrace			
Address			
Plantation, FL 33324			
City/State and Zip Code			
ligia@jevaair.com			
E-mail address: (to be used for future annu	al report notification)		
For further information concerning this matter,	please call:		
Ligia P. Evangelista	754 366-6390		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
☑ \$25 Fiting Fee	☐ \$55 Filing Fee & Certified Copy		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	Tame of the limited liability company: Continental I	Private Jets LLC	
2. (a)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	400 Herndon Avenue, Suite B	400 H	erndon Avenue, Suite B
	Orlando, FL 32803	Orland	lo, FL 32803
	6/18/2012	L12000	080099
3.	Date of filing/registration in Florida	4.	Document number
5. (a)		
J. (u	Registered Agent and Registered Office shown on the records o	f the Florida Dept. of S	tate:
	Brian Delarosiere		
			
	1627 N. Federal Highway		
	Delray Beach . F	1.33483	- 25 17 <u>1</u>
		**	
(b)			
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address	• • • • • • • • • • • • • • • • • • • •
	Ligia P. Evangelista		3: 3: 32
	NEW Registered Office Address:		
	600 Carrotwood Terrace		
	Plantation F	L ³³³²⁴	
the chagent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered off liability company, i of the limited liabi	ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
Sign	Signature of a member of authorized representative of a member		Printed or typed name of signee
provi: the of to me	eby accept the appointment as registered agent and assions of all statutes relative to the proper and completed ignitions of my position as registered agent as provided reflect a change in the registered office address, led in writing of this change.	gree to act in this c e performance of n led for in Chapter 6 hereby confirm th	apacity. I further agree to comply with the ly duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been
Signal	LOGACK ALST. ure of Registered Agent		